STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

PLEASE PRINT

APR 19 2017

I. Name of Lobbyist(s) Douglas Mo	Nutt	<u> </u>	NEW HAMPSHIRE DEPARTMENT OF STATE
II. Name of lobbyist's partnership, firm	n or corporation, if any	:	- 11 11 2
AARP New Hampshire			
(Name of partnership, fire	n or corporation)		
45 S. Main Street, Suite 202	Concord	NH	03301
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(306) 230-4109)	e-mait dmcnut	t@aarp.org
(Telephone)	(Fax)		
III. This statement covers: (Choose one reportable expense transactions which			may file a separate report for
$\overline{\mathbf{x}}$ All reportable transactions occurring	in the months prior to th	e reporting date relative to	the following client:
AARP New Hampshire			
	nt as it appears on the Lobb	yist Registration Form)	
OR	yist (including the lobby	vist's family), or the lobbyi	ing firm listed below which are
unrelated to any particular client.			
IV. Date of Report April 26, 2017 Reports cover: activity from date of regi.		July 26, 2017 activity from 4/1/17 to 6/30/	47
October 25, 201		January 31, 2018	
activity from 7/1/17		activity from 10/1/17 to 12/	
V. There have been no fees received If this box is checked, complete just this f Concord, NH 03301.			
VI. Check if additional reports are atta	ached:		
x If you have received fees or made ex	penditures, you must file	Addendum A- Fees and	Expenses
☐ If you have paid an honorarium or re Expense Reimbursement	imbursed expenses, you	must file Addendum B- I	Report of Honorariums or
☐ If you, your firm, or your family has	made political contribut	ions, you must file Adden	dum C- Political Contributions
Sworn Statement/Affirmation by Lobb I have read RSA 15, RSA 15-B, RSA 14 and complete to the best of my knowledg (Signature of lobbyist) Douglas McNutt (Print Name of lobbyist)	-C and RSA 664 and her	eby swear or affirm that th	1

L E A S E P R I N

T

P

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

- - 1 0 0047

(RSA Chapter 15:6)

APR 19 2017

RECEIVED

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) Douglas McNutt	DEPARTMENT (
II. Name of lobbyist's partnership, firm or corporation, if any:	
AARP New Hampshire	
(Name of partnership, firm or corporation)	
III. Name of Client	Date
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The grareduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a) \$1965.15
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year).	b) \$ <u>0</u> ear)
c) Total of all fees received to date (Add lines a and b)	c) \$1965.15
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for examp lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm. e aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a business ses than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for ue of greater than \$25, purchase of a er than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.b) Total aggregate of expenditures during this reporting period, not reported	a) \$
in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ <u>3270.00</u>

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e)\$0
f) Total of all expenses year to date	f) \$3270.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
Elizabeth's Kitchen	\$ 3270.00
	\$
	\$
	\$
	\$
	\$
S. Cara and A.A.C. and a state of the state	
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	m that the foregoing information
is true and complete to the best of my knowledge and belief.	. 1 /
	4/14/17
(Signature of lobbyist)	(Date)
Douglas McNutt	
(Print Name of lobbyist)	